

MAY 25 2005 10:55AM

NO. 7645 P. 1

BLAKE, CASSELS & GRAYDON LLP RECEIVED
CENTRAL FAX CENTER
BARRISTERS & SOLICITORS | PATENT & TRADE-MARK AGENTS

MAY 25 2005

Facsimile: 416.863.2653
Box 25, Commerce Court West
199 Bay Street
Toronto, Ontario, Canada
M5L 1A9

NUMBER OF PAGES INCLUDING COVER PAGE: 7

DATE: May 25, 2005

TO: (Name, Company, City & Country)

FACSIMILE:
703.872.9306

TELEPHONE:
703-305-0870

Commissioner for Patents
United States Patent and Trademark Office

FROM: Mark D. Penner

BUSINESS PHONE: 416.863.4283
SECRETARY EXT.: 416.863.2247

MESSAGE:

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted at 703.872.9306 to the Commissioner of Patents, P.O. Box 1450, Alexandria VA 22313-1450 on the date set forth below:

May 25, 2005

Mark D. Penner, Registration No. 48,092

CONFIDENTIALITY NOTE:

This message is **CONFIDENTIAL** and is legally privileged. It is intended only for the person(s) or organization(s) named above and any other use or disclosure is strictly forbidden. If this message is received by anyone else, please notify us at once by telephone (collect, 416.863.4283) and return the original by mail to:

Mark D. Penner
Box 25, Commerce Court West
Toronto, Ontario, Canada
M5L 1A9

27871
PATENT TRADEMARK OFFICE

ORIGINALS SENT BY: (check one) ☒ MAIL ☐ TDX ☐ NOT SENT ☐ _____
(please specify)

ANY PROBLEMS? Please contact your Fax Operator or the Blakes Fax Operator at: 416.863.3074

CONFIDENTIALITY NOTE:

This message is **CONFIDENTIAL** and is legally privileged. It is intended only for the person(s) or organization(s) named above and any other use or disclosure is strictly forbidden. If this message is received by anyone else, please notify us at once by telephone and return the original by mail to the above address. Thank You.

FILE REFERENCE: 99997/99993

TIME IN: _____ TIME SENT: _____ OPERATOR: _____
21409754.1

PTO/SB/21 (09-04)

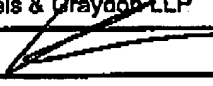
Approved for use through 07/31/2006. OMB 0651-0031


U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | | |
|--|----------------------|------------------------|---------|
| TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small> | Application Number | 10/031,449 | |
| | Filing Date | January 19, 2002 | |
| | First Named Inventor | YUDIN, Andrei K. | |
| | Art Unit | | |
| | Examiner Name | | |
| Total Number of Pages in This Submission | 2 | Attorney Docket Number | 61905/2 |

| ENCLOSURES (Check all that apply) | | |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for withdrawal as Attorney or Agent and change of correspondence address |
| Remarks _____ | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm Name | Blake, Cassels & Graydon LLP |
| Signature |  |
| Printed name | Mark D. Penner |
| Date | May 25/05 |
| Reg. No. | 48,092 |

| CERTIFICATE OF TRANSMISSION/MAILING | |
|--|---|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: | |
| Signature |  |
| Typed or printed name | Mark D. Penner |
| Date | May 25/05 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/83 (04-05)

Approved for use through 11/30/2005. OMB 0851-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

| | |
|------------------------|------------------|
| Application Number | 10/031,449 |
| Filing Date | January 19, 2002 |
| First Named Inventor | YUDIN, Andrei K. |
| Art Unit | |
| Examiner Name | |
| Attorney Docket Number | 61905/2 |

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number **27871**

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

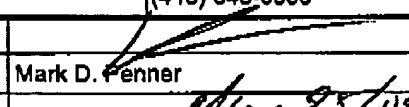
Applicant has instructed Blake, Cassels & Graydon LLP to do no further work in respect of this application.

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number:

OR

| | | | |
|---|---|------------------|----------------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Yiektra Inc. c/o Mr. Akil Dharamsi | | |
| Address | 100 University Avenue 12th Floor, North Tower | | |
| City | Toronto | State | Ontario |
| | | Zip | M5J 1V8 |
| Country | Canada | | |
| Telephone | (416) 845-8800 | Email | |
| Signature |  | | |
| Name | Mark D. Penner | Registration No. | 48,092 |
| Date | May 25/05 | Telephone No. | (416) 863-4283 |

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/21 (08-04)


Approved for use through 07/31/2006. OMB 0861-0031

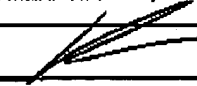
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | | |
|--|----------------------|------------------------|----------|
| TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small> | Application Number | 10/927,628 | |
| | Filing Date | June 11, 2003 | |
| | First Named Inventor | YUDIN, Andrei K. | |
| | Art Unit | | |
| | Examiner Name | | |
| Total Number of Pages in This Submission | 2 | Attorney Docket Number | 61905/14 |

| ENCLOSURES (Check all that apply) | | |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for withdrawal as Attorney or Agent and change of correspondence address |
| Remarks _____ | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|---|----------|--------|
| Firm Name | Blake, Cassels & Graydon LLP | | |
| Signature |  | | |
| Printed name | Mark D. Penner | | |
| Date | May 25/05 | Reg. No. | 48,092 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
|---|---|------|-----------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: | | | |
| Signature |  | | |
| Typed or printed name | Mark D. Penner | Date | May 25/05 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/83 (04-05)

Approved for use through 11/30/2005. OMB 0851-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

| | |
|------------------------|------------------|
| Application Number | 10/927,628 |
| Filing Date | June 11, 2003 |
| First Named Inventor | YUDIN, Andrei K. |
| Art Unit | |
| Examiner Name | |
| Attorney Docket Number | 61905/14 |

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 27871

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

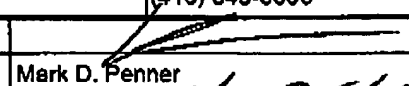
Applicant has instructed Blake, Cassels & Graydon LLP to do no further work in respect of this application.

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number.

OR

| | | | |
|---|---|------------------|----------------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Ylektra Inc. c/o Mr. Akil Dharamsi | | |
| Address | 100 University Avenue 12th Floor, North Tower | | |
| City | Toronto | State | Ontario |
| | | Zip | M5J 1V6 |
| Country | Canada | | |
| Telephone | (416) 645-6600 | Email | |
| Signature |  | | |
| Name | Mark D. Penner | Registration No. | 48,092 |
| Date | May 25/05 | Telephone No. | (416) 863-4283 |

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

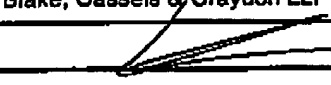
PTO/SB/21 (09-04)

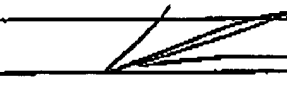
Approved for use through 07/31/2006, OMB 0651-0031

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | |
|--|----------------------|---------------------------------|
| TRANSMITTAL FORM | Application Number | 10/484,843 |
| | Filing Date | January 25, 2004 |
| | First Named Inventor | YUDIN, Andrei K. |
| | Art Unit | |
| | Examiner Name | |
| (to be used for all correspondence after initial filing) | | |
| Total Number of Pages in This Submission | 2 | Attorney Docket Number 61905/19 |

| ENCLOSURES (Check all that apply) | | |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD <input type="checkbox"/> Remarks | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for withdrawal as Attorney or Agent and change of correspondence address |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
| Firm Name | Blake, Cassels & Graydon LLP | |
| Signature |  | |
| Printed name | Mark D. Penner | |
| Date | May 28/05 | Reg. No. 48,092 |

| CERTIFICATE OF TRANSMISSION/MAILING | |
|---|---|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: | |
| Signature |  |
| Typed or printed name | Mark D. Penner |
| Date | May 25/05 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/83 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

| | |
|------------------------|------------------|
| Application Number | 10/484,843 |
| Filing Date | January 25, 2004 |
| First Named Inventor | YUDIN, Andrei K. |
| Art Unit | |
| Examiner Name | |
| Attorney Docket Number | 61905/19 |

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number **27871**

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:


Applicant has instructed Blake, Cassels & Graydon LLP to do no further work in respect of this application.

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number:

OR

| | | | | | |
|---|---|-------|---------|------------------|----------------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Ylektra Inc. c/o Mr. Akil Dharamsi | | | | |
| Address | 100 University Avenue 12th Floor, North Tower | | | | |
| City | Toronto | State | Ontario | Zip | M5J 1V6 |
| Country | Canada | | | | |
| Telephone | (416) 845-6600 | | | Email | |
| Signature |  | | | | |
| Name | Mark D. Penner | | | Registration No. | 48,092 |
| Date | May 25/05 | | | Telephone No. | (416) 863-4283 |

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.